

Entry Blank—Please Type or Print

☐ Ms./Artist

☒ Mr./Artist

MICHAEL T. POSELEY

(last name last)

Permanent

Address

146

Street

MAYWOOD

City

YOUNGSTOWN

44512

Zip

Daytime Tel. (

216)

782 0642

area

Temporary or

Studio Address

510 WICK AVE.

Street

City

44555

Zip

Daytime Tel. (

216)

744 7408

area

If you do not presently live in one of the counties of the Western Reserve, in which county were you born? _____

Collaborator (if any) _____

If May Show entries are not accepted:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist at _____

Street

City

State

Zip

Mon
7/18 - NO
7/19 if
message

Special Instructions

Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.

When necessary, include instructions or a drawing for assembling and displaying an object.

Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until July 17, 1988.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.

Signature _____

I have received the unsold/unaccepted object(s) in good condition.

Signature _____

Entry Blanks

A

☐ Paintings

☒ Sculpture

☐ Graphics

☐ Crafts

☐ Photography

(specify category)

Materials used (media):

CERAMIC & MIXED

Title

WEST SIDE SLANT

Price or NFS

8000

Insurance Value
if NFS Only

SAME

Size

76" 30" 13"
height x width x depth

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
Unframed

Price of
Frame

(P-32)

ACCEPTED	DO NOT WRITE IN THIS SECTION (P-32) 2 44abc 45pp 2 76abc pc	ACCEPTED
X		X
NOT ACCEPTED		NOT ACCEPTED

B

☐ Paintings

☒ Sculpture

☐ Graphics

☐ Crafts

☐ Photography

(specify category)

Materials used (media):

CERAMIC & MIXED

Title

Bond Dod

Price or NFS

3000

Insurance Value
if NFS Only

Size

35" 15" 16"
height x width x depth

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
Unframed

Price of
Frame

ACCEPTED	DO NOT WRITE IN THIS SECTION 2 45abc pp 2 77abc pc	ACCEPTED	REC'D
NOT ACCEPTED		NOT ACCEPTED	DATE
X			

Detach entire portion along dotted line and submit with slides, but retain tags

1988 MAY SHOW

The Cleveland Museum of Art
Cleveland, Ohio 44106



Michael T. Poseley
Name

146 Maywood
Address

Youngstown Ohio 44512
City & State Zip

Notification #1

**Do Not
Detach**

A

☒ Paintings

☐ Graphics

☐ Photography

☒ Sculpture

☐ Crafts

Title

WEST SIDE SLANT

ACCEPTED

NOT ACCEPTED

X

B

☐ Paintings

☐ Graphics

☐ Photography

☐ Sculpture

☐ Crafts

Title

Bond Dud

ACCEPTED

NOT ACCEPTED

X

Return of Objects

Not Accepted: May 17-21

Accepted: July 26-30